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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVISION	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
youi picti exai		e the name that is on government-issued ire identification (for nple, your driver's ise or passport).	Shirley First name Ruth Middle name	First name Middle name
	Bring your picture identification to your meeting with the trustee.		Gilliam Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ude your married or den names.	Shirley R Gilliam Shirley Gilliam	
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer atification number	xxx-xx-4681	

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Debtor 1 Shirley Ruth Gilliam

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and		■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)		
	doing business as names				
		EIN	EIN		
5.	Where you live		If Debtor 2 lives at a different address:		
		327 Steele Drive Hampton, GA 30228			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Henry County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Debtor 1 Shirley Ruth Gilliam Case number (if known)

	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	■ Chap	ter 7				
		☐ Chap	ter 11				
		☐ Chap					
		☐ Chap					
	How you will pay the fee	ab	out how y der. If you	ou may pay. Typically	, if you are paying the fee yo	ck with the clerk's office in your local court for more details burself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with	
		☐ In	eed to pa			on, sign and attach the Application for Individuals to Pay	
		□ Ire bu ap	equest the t is not re-	at my fee be waived quired to, waive your fo our family size and you	(You may request this option ee, and may do so only if you are unable to pay the fee in	n only if you are filing for Chapter 7. By law, a judge may, but income is less than 150% of the official poverty line than installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition.	
	Have you filed for bankruptcy within the	■ No.					
	last 8 years?	☐ Yes.					
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
	Are any bankruptcy	■ No					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
•	Do you rent your	■ No.	Go to	line 12.			
•	Do you rent your residence?	■ No.			an eviction judgment agains	st you?	
١.					an eviction judgment agains	st you?	

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Document Page 4 of 56 Case number (if known) Debtor 1 Shirley Ruth Gilliam Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor Go to Part 4. of any full- or part-time No. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to Chapter 11 of the proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or Bankruptcy Code, and you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, are you a small business cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. debtor or a debtor as § 1116(1)(B). defined by 11 U.S.C. § 1182(1)? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and ☐ Yes. I do not choose to proceed under Subchapter V of Chapter 11. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I ☐ Yes. choose to proceed under Subchapter V of Chapter 11. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any property that needs If immediate attention is needed, why is it needed? immediate attention? For example, do you own

Number, Street, City, State & Zip Code

Where is the property?

perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

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Debtor 1 Shirley Ruth Gilliam

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 **Shirley Ruth Gilliam** Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Shirley Ruth Gilliam Signature of Debtor 2 Shirley Ruth Gilliam Signature of Debtor 1 Executed on September 21, 2020 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Shirley Ruth Gilliam Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Brian N	I. Shockley, GA Bar No.	Date	September 21, 2020
Signature of	Attorney for Debtor		MM / DD / YYYY
Brian M. S	hockley, GA Bar No. 643752		
	ashington, P.C.		
Firm name			
3300 North	neast Expressway		
Building 3			
Atlanta, G	A 30341		
Number, Street,	City, State & ZIP Code		
Contact phone	770-488-9338	Email address	cworders@cw13.com
GA			
Dornumber 9 C	toto		

Fill i	n this inform	nation to identify you	r case:			
Debt						
Deni	OI I	Shirley Ruth Gill First Name	Middle Name	Last Name		
Debt (Spous	or 2 se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (OF GEORGIA - ATLANTA DI	VISION	
Case	number					
(if kno	wn)					Check if this is an mended filing
	icial Fo		Affaina fan Indivis	luala Filima fan D		
			Affairs for Individ			4/19
inforr	nation. If m		attach a separate sheet to		equally responsible for sup additional pages, write you	
Part		, , , , ,	stion. Irital Status and Where You	Lived Refore		
		· current marital statu		Lived Belole		
	□ Married	our one maritar orace				
İ	Not mar	ried				
2. I	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
ı	No					
I	_	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territor	
states	and territori	es include Arizona, Ca	lifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto Ri	co, Texas, Washington and V	visconsin.)
	■ No □ Yes. Ma	ke sure vou fill out <i>Scl</i>	nedule H: Your Codebtors (Of	fficial Form 106H)		
		·	,	10011).		
Part	2 Explai	n the Sources of You	r Income			
F	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
ı	□ No					
ı	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$13,860.00	☐ Wages, commissions, bonuses, tips	,
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Shirley Ruth Gilliam Case number (if known)

			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2019)		■ Wages, commissions, bonuses, tips	\$24,000.00	☐ Wages, commissions, bonuses, tips		
			☐ Operating a business		☐ Operating a business	
	dar year before December 31,		■ Wages, commissions, bonuses, tips	\$24,000.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	
Include inc and other winnings. I List each s	come regardles public benefit p If you are filing	s of wheth ayments; a joint cas gross inco	pensions; rental income; inter e and you have income that y	amples of other income are a	•	
			Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
	/ 1 of current y iled for bankru		Social Security	\$18,297.00		
			Stimulus Check	\$1,200.00		
For last calen (January 1 to	dar year: December 31,	2019)	Social Security	\$24,000.00		
	dar year before December 31,		Social Security	\$23,760.00		
Part 3: List	Certain Paym	ents Vou	Made Before You Filed for	Rankruntov		
	•					
6. Are either ☐ No.	Neither Debto	or 1 nor D	s debts primarily consume ebtor 2 has primarily consu personal, family, or househo	umer debts. Consumer debts	s are defined in 11 U.S.C. § 10	11(8) as "incurred by an
		days befo	re you filed for bankruptcy, di	d you pay any creditor a total	of \$6,825* or more?	
		o to line 7				
	pa no	aid that cre ot include	editor. Do not include paymer payments to an attorney for t	nts for domestic support oblig his bankruptcy case.	n one or more payments and t ations, such as child support a or after the date of adjustment	and alimony. Also, do
■ Yes.	Debtor 1 or D	ebtor 2 o	r both have primarily consu		,	
	□ _{No.} G	o to line = =	. •			
	■ Yes Li				the total amount you paid tha	

attorney for this bankruptcy case.

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Debtor 1 Shirley Ruth Gilliam

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	ayment for
	Nissan Motor Acceptance Corporation Reg. Agent: Corporation Service Company 40 Technology Pkwy South Suite 300 Norcross, GA 30092	09/2020 08/2020 07/2020	\$3,246.00	\$40,000.00	☐ Mortgage ☐ Car ☐ Credit Car ☐ Loan Re ☐ Suppliers ☐ Other	ard
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general post which you are an officer, director, person in a business you operate as a sole proprietor. In alimony.	artners; relatives of any genon n control, or owner of 20% of	eral partners; partner more of their voting	erships of which yo g securities; and a	u are a generary ny managing a	al partner; corporations agent, including one for
	No☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments to an insider 					ebt that benefited an	
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Par	t 4: Identify Legal Actions, Repossessio	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.					
	□ No					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
	FORD MOTOR CREDIT COMPANY,	Suit on Account	State Court of	Henry	☐ Pending	
	LLC VS		County 44 John Frank	Ward Blyd	On appe	eal
	SHIRLEY GILLIAM STSV2019002011		McDonough, G		■ Conclud	
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo		rty repossessed, f	oreclosed, garnis	shed, attache	d, seized, or levied?
	■ No. Go to line 11. Yes. Fill in the information below.					
	Yes. Fill in the information below. Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened				property

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Del	btor 1	Shirley Ruth Gilliam		Document	Page 11 of	56 Case number (if known)	
							· <u></u>	
		in 90 days before you filed for bankru unts or refuse to make a payment be No Yes. Fill in the details.				or financial ins	titution, set off any a	amounts from your
	Cred	ditor Name and Address	Des	scribe the action	n the creditor took		Date action was taken	Amount
12.	court	in 1 year before you filed for bankrup t-appointed receiver, a custodian, or No Yes			roperty in the poss	session of an a	ssignee for the ben	efit of creditors, a
Pai	rt 5:	List Certain Gifts and Contributions	S					
	Withi ■ □	in 2 years before you filed for bankru No Yes. Fill in the details for each gift.	ıptcy, d	, , ,		alue of more th		
	per p	s with a total value of more than \$600 person son to Whom You Gave the Gift and lress:)	Describe the g	jifts		Dates you gave the gifts	Value
		in 2 years before you filed for bankru No Yes. Fill in the details for each gift or co		, , ,	gifts or contribution	ons with a total	value of more than	\$600 to any charity?
	more Chai	s or contributions to charities that to e than \$600 rity's Name Iress (Number, Street, City, State and ZIP Code)		Describe what	t you contributed		Dates you contributed	Value
Pa	rt 6:	List Certain Losses						
15.	or ga	in 1 year before you filed for bankrup ambling? No Yes. Fill in the details.	otcy or	since you filed f	for bankruptcy, did	l you lose anytl	hing because of the	ft, fire, other disaster
		the loss occurred	Include	the amount that	e coverage for the insurance has paid. 33 of Schedule A/E	List pending	Date of your loss	Value of property lost
Pa	rt 7:	List Certain Payments or Transfers						
16.	cons	in 1 year before you filed for bankrup sulted about seeking bankruptcy or p de any attorneys, bankruptcy petition pr	reparin	ig a bankruptcy	petition?			erty to anyone you
	_	No						
	Pers	Yes. Fill in the details. son Who Was Paid ress		Description ar	nd value of any pro	perty	Date payment or transfer was	Amount of

Email or website address Person Who Made the Payment, if Not You **CIN Legal Data Services** Box 88229 Milwaukee, WI 53288

made

\$70.00 Credit Counseling, Credit Reports, Tax Transcript

09/2020

\$70.00

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Case number (if known) Document

Debtor 1 Shirley Ruth Gilliam

17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors. Do not include any payment or transfer that you No Yes. Fill in the details.	s or to make payments			transfer any prope	rty to anyone who
	Person Who Was Paid Address	Description and va	alue of any prope	rty	Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers mad include gifts and transfers that you have already No Yes. Fill in the details.	siness or financial affai de as security (such as th	irs?			
	Person Who Received Transfer Address Person's relationship to you	Description and va property transferre			ny property or eceived or debts hange	Date transfer was made
19.	Within 10 years before you filed for bankruptobeneficiary? (These are often called asset-prote No □ Yes. Fill in the details.		/ property to a sel	lf-settled trus	st or similar device	of which you are a
	Name of trust Description and value of the property transferred				d	Date Transfer was made
Par	8: List of Certain Financial Accounts, Inst	ruments, Safe Deposit	Boxes, and Stora	ge Units		
	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No Yes. Fill in the details.	other financial accoun	ts; certificates of		-	
		Last 4 digits of account number	Type of account instrument	clos	e account was sed, sold, ved, or sferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for	bankruptcy, any s	safe deposit	box or other deposi	itory for securities,
	Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, State and ZIP Code)		escribe the c	ontents	Do you still have it?
22.	Have you stored property in a storage unit or ■ No □ Yes. Fill in the details.	place other than your	home within 1 yea	ar before you	ı filed for bankrupto	cy?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or he to it? Address (Number, State and ZIP Code)		escribe the c	ontents	Do you still have it?

Page 13 of 56
Case number (if known) Document

Debtor 1 Shirley Ruth Gilliam

Pai	t 9: Identify Property You Hold or Control for	Someone Else						
23.	23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.							
	■ No							
	Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value				
Pa	dive Details About Environmental Inform	nation						
For	the purpose of Part 10, the following definitions	s apply:						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface water, groun						
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa	l sites.						
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s waste, hazardous substance, tox	ic substance,				
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n they occurred.					
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	e under or in violation of an enviro	nmental law?				
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any release of hazardous material?							
	No							
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Pai	t 11: Give Details About Your Business or Co	nnections to Any Business						
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have a	ny of the following connections to	any business?				
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity	, either full-time or part-time					
	☐ A member of a limited liability compan	y (LLC) or limited liability partnersh	nip (LLP)					
	☐ A partner in a partnership							
	☐ An officer, director, or managing execu	itive of a corporation						
	An owner of at least 5% of the voting of	u aguity accomition of a comparation						

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Case number (if known)

	■ No. None of the above applies. Go to l	Part 12.	
	☐ Yes. Check all that apply above and fil	I in the details below for each business.	
	Business Name	Describe the nature of the business	Employer Identification number
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number or ITIN.
			Dates business existed
	Within 2 years before you filed for bankruptinstitutions, creditors, or other parties.	tcy, did you give a financial statement to a	nyone about your business? Include all financial
	■ No		
	Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Part	12: Sign Below		
are to		false statement, concealing property, or o	declare under penalty of perjury that the answers btaining money or property by fraud in connection ars, or both.
/s/ \$	Shirley Ruth Gilliam	_	
	rley Ruth Gilliam nature of Debtor 1	Signature of Debtor 2	
Date	September 21, 2020	Date	
Did y ■ No	•	ent of Financial Affairs for Individuals Filin	g for Bankruptcy (Official Form 107)?
Did y	ou pay or agree to pay someone who is no	t an attorney to help you fill out bankruptc	y forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Debtor 1 Shirley Ruth Gilliam

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			Docu	ıment	Page 15 of 56				
Fill in this inf	ormation to identify you	case and thi	is filing	:					
Debtor 1	Shirley Ruth Gill				- AN		_		
Debtor 2	First Name	Middle	Name		Last Name				
(Spouse, if filing)	First Name	Middle	Name		Last Name		-		
United States	Bankruptcy Court for the:	NORTHERN	N DISTE	RICT OF GE	ORGIA - ATLANTA DIV	ISION	_		
Case number					_				Check if this is an amended filing
Schedun each category	Form 106A/B ILE A/B: Property, separately list and descriptions. Be as complete and accurrence space is needed, attaclusation.	be items. List a	e. If two i	married peop	ole are filing together, both	n are equally	responsible for s	upply	ing correct
. Do you own o	ibe Each Residence, Buildin or have any legal or equitab Part 2. re is the property?					y?			
	ele Drive ess, if available, or other description	n	What ■ □	Single-family Duplex or me	rty? Check all that apply y home ulti-unit building m or cooperative	the a	mount of any secur	ed cla	or exemptions. Put ims on Schedule D: lecured by Property.
Hampto	on GA 30.	228-0000 ZIP Code		Manufacture Land Investment p	ed or mobile home		ent value of the e property?		urrent value of the ortion you own? \$65,000.00
			□ □ Who I	Timeshare Other nas an intere	st in the property? Check o	(such ne a life		nancy	ownership interest by the entireties, or
Henry				Debtor 2 onl	•				
County				At least one information	d Debtor 2 only of the debtors and another you wish to add about thi tion number:	ш (Check if this is co (see instructions) as local	mmur	nity property
	Iollar value of the portior u have attached for Part								\$65,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1 Case 20-70028-jwc Doc 1 Filed 09/21/20 Entered 09/21/20 13:56:13 Desc Main Document Page 16 of 56

Case number (if known)

Deb	tor 1 S	hirley Ruth	n Gilliam	C	ase number (if known)	
3. C a	ars, vans,	trucks, trac	tors, sport utility ve	hicles, motorcycles		
	No					
	Yes					
3.1	Make:	Nissan		Who has an interest in the property? Check one		laims or exemptions. Put ed claims on Schedule D:
	Model:	Titan		Debtor 1 only		ims Secured by Property.
	Year:	2017		Debtor 2 only	Current value of the	Current value of the
		nate mileage:	30000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other Inf	ormation:		At least one of the debtors and another		
				Check if this is community property (see instructions)	\$36,550.00	\$36,550.00
5 A .p Part Do y	ages you 3: Descri	have attach be Your Perso or have any I goods and f	ed for Part 2. Write onal and Household Ite egal or equitable in	terest in any of the following items?		\$36,550.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
_	Yes. De	scribe				
			3 BR			\$300.00
			0 2.1			
E		Televisions a including cell		eo, stereo, and digital equipment; computers, printenedia players, games	ers, scanners; music collecti	ons; electronic devices
E	No	Antiques and other collecti	l figurines; paintings, ons, memorabilia, co	prints, or other artwork; books, pictures, or other ar illectibles	rt objects; stamp, coin, or ba	seball card collections;
L	Yes. De	scribe				
E	xamples:	musical instr	graphic, exercise, ar	nd other hobby equipment; bicycles, pool tables, go	olf clubs, skis; canoes and k	ayaks; carpentry tools;
	. 30. 20					
			Riding Lawn Mo	otor		\$500.00

Official Form 106A/B

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18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

No

☐ Yes...... Institution or issuer name:

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D	ebtor 1	Shirley Ruth Gillia	m		Case number (if known)	
19.	joint	ublicly traded stock an venture	d interests in incorporate	ed and unincorporated business	es, including an interest in	an LLC, partnership, and
	No					
	☐ Yes.		n about themame of entity:		% of ownership:	
20.	Nego	tiable instruments include	e personal checks, cashiers	le and non-negotiable instrumen s' checks, promissory notes, and m er to someone by signing or deliveri	oney orders.	
	☐ Yes.	Give specific information Is	n about them suer name:			
21.		ment or pension accou ples: Interests in IRA, EF		o), thrift savings accounts, or other p	pension or profit-sharing plar	าร
	☐ Yes.	List each account separ Type	ately. e of account:	Institution name:		
22.	Your		sits you have made so that	t you may continue service or use fi ic utilities (electric, gas, water), tele		, or others
				Institution name or individual:		
23.	_	ties (A contract for a per	iodic payment of money to	you, either for life or for a number of	of years)	
	■ No					
			me and description.			
24.	26 U.S	ts in an education IRA, .C. §§ 530(b)(1), 529A(b)		ïed ABLE program, or under a qι	ualified state tuition progra	am.
	■ No □ Yes.	Institution	n name and description. Se	eparately file the records of any inte	rests.11 U.S.C. § 521(c):	
25.	Trusts	s, equitable or future int	erests in property (other	than anything listed in line 1), ar	nd rights or powers exerci	sable for your benefit
		Give specific information	n about them			
26.	Exam			ther intellectual property rom royalties and licensing agreeme	ents	
	■ No □ Yes.	Give specific information	n about them			
27.	_Exam	ses, franchises, and oth ples: Building permits, ex		ive association holdings, liquor lice	nses, professional licenses	
	■ No □ Yes.	Give specific information	n about them			
M	oney or	property owed to you?	•			Current value of the portion you own? Do not deduct secured
28.	Tax re	funds owed to you				claims or exemptions.
_0.	■ No					
	☐ Yes.	Give specific information	n about them, including wh	ether you already filed the returns a	and the tax years	
29.	Exam ■ No	•	7	ort, child support, maintenance, dive	orce settlement, property set	ttlement
		Give specific information	າ			

Official Form 106A/B Schedule A/B: Property page 4

Case 20-70028-jwc Doc 1 Filed 09/21/20 Entered 09/21/20 13:56:13 Page 19 of 56 Document Case number (if known) Debtor 1 **Shirley Ruth Gilliam** 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$1.015.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47.

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

No

Part 7:

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here

Describe All Property You Own or Have an Interest in That You Did Not List Above

\$0.00

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Debtor 1 **Shirley Ruth Gilliam** Case number (if known) List the Totals of Each Part of this Form Part 8: Part 1: Total real estate, line 2 55. \$65,000.00 Part 2: Total vehicles, line 5 56. \$36,550.00 Part 3: Total personal and household items, line 15 57. \$1,020.00 58. Part 4: Total financial assets, line 36 \$1,015.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total 62. \$38,585.00 \$38,585.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$103,585.00

Official Form 106A/B Schedule A/B: Property page 6

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Fill in this inform	mation to identify your	case:			
Debtor 1	Shirley Ruth Gillia	am			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA - ATLANTA DIVISI	ON	
Case number					☐ Check if this is an amended filing
					3

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B				
327 Steele Drive Hampton, GA 30228 Henry County	\$65,000.00		\$21,500.00	O.C.G.A. § 44-13-100(a)(1)	
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit		
2017 Nissan Titan 30000 miles Line from Schedule A/B: 3.1	\$36,550.00		\$5,000.00	O.C.G.A. § 44-13-100(a)(3)	
Ellie Holli Govedale 775. G.T			100% of fair market value, up to any applicable statutory limit		
3 BR Line from Schedule A/B: 6.1	\$300.00		\$300.00	O.C.G.A. § 44-13-100(a)(4)	
Ellie Holli Garedale Arb. G.T			100% of fair market value, up to any applicable statutory limit		
1 Cellphone, 1 TV Line from Schedule A/B: 7.1	\$100.00		\$100.00	O.C.G.A. § 44-13-100(a)(4)	
Ellie Holli Goreadie A.E. III			100% of fair market value, up to any applicable statutory limit		
Riding Lawn Motor Line from Schedule A/B: 9.1	\$500.00		\$500.00	O.C.G.A. § 44-13-100(a)(6)	
Ello Holli Gorioddio 77 B. 411			100% of fair market value, up to any applicable statutory limit		

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De	btor 1 Shirle	y Ruth Gilliam		Case number (if known)				
		on of the property and line on that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption		
			Copy the value from Schedule A/B	Che	ck only one box for each exemption.			
	Clothes	nedule A/B: 11.1	<u>\$100.00</u> ■		\$100.00	O.C.G.A. § 44-13-100(a)(4)		
L	Line nom 30/	ledule A/D. 1111			100% of fair market value, up to any applicable statutory limit			
	Costume John Sol	ewelry hedule A/B: 12.1	\$20.00		\$20.00	O.C.G.A. § 44-13-100(a)(5)		
	Line nom Scr	ledule A/B. 12.1			100% of fair market value, up to any applicable statutory limit			
	Checking: Bank of America Line from Schedule A/B: 17.1		\$1,000.00		\$1,000.00	O.C.G.A. § 44-13-100(a)(6)		
	Line nom 3cr	ledule A/B. 11.1			100% of fair market value, up to any applicable statutory limit			
	•	ank of America	\$15.00		\$15.00	O.C.G.A. § 44-13-100(a)(6)		
	Line nom 30	iedule A/D. 17.2			100% of fair market value, up to any applicable statutory limit			
3.		ming a homestead exemption djustment on 4/01/22 and every			led on or after the date of adjustmer	nt.)		
	☐ Yes. Did	I you acquire the property cove	ered by the exemption w	ithin 1	,215 days before you filed this case	?		
	□ No	0						
	□ Ye	es						

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Fill in this inform	nation to identify yo	ur case:			
Debtor 1	Shirley Ruth Gi				
Debtor 2	First Name	Middle Name Last Name			
(Spouse if, filing)	First Name	Middle Name Last Name		-	
United States Ba	nkruptcy Court for the	: NORTHERN DISTRICT OF GEORGIA - ATI	LANTA DIVISION		
Case number					
(if known)				☐ Check	c if this is an
				amen	ded filing
Official Forn	o 106D				
		N/ha Haya Claima Caayna	d by Droport		4044
Schedule	D: Creditors	Who Have Claims Secure	a by Propert	<u>y </u>	12/15
	e Additional Page, fill it	If two married people are filing together, both are edout, number the entries, and attach it to this form. C			
• •	have claims secured b	v vour property?			
		this form to the court with your other schedules. Y	ou have nothing else t	to report on this form.	
_	all of the information	·	ou navo noum g oloo .		
		below.			
	Il Secured Claims		Column A	Column B	Column C
for each claim. If m	ore than one creditor ha	more than one secured claim, list the creditor separately s a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
much as possible, I	ist the claims in alphabet	ical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Ford Moto Company		Describe the property that secures the claim:	\$7,128.00	\$7,128.00	\$0.00
Creditor's Name		All Debtor's real and personal			
Reg. Agei		property			
•	on Company Main Street	As of the date you file, the claim is: Check all that apply.			
Cumming	, GA 30040	☐ Contingent			
Number, Street	, City, State & Zip Code	☐ Unliquidated			
Who awas the de	ht? Chask and	Disputed			
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or se	ourod		
■ Debtor 1 only ■ Debtor 2 only		car loan)	cureu		
Debtor 1 and De	ehtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	he debtors and another	Judgment lien from a lawsuit			
☐ Check if this cl		Other (including a right to offset)			
	Opened 01/14 Last				
	VI/I4 Last				

Date debt was incurred 8/12/18

Last 4 digits of account number

2011

Debtor 1 Shirley Ruth Gilliam		Case number (if known)		
First Name Middle Na	ame Last Name			
2.2 NMAC	Describe the property that secures the claim:	\$42,474.00	\$36,550.00	\$5,924.00
Creditor's Name	2017 Nissan Titan 30000 miles			
Attn: Bankruptcy Po Box 660366 Dallas, TX 75266	As of the date you file, the claim is: Check all that apply.			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or car loan)	secured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred 7/09/20 2.3 Republic Finance, LLC	Last 4 digits of account number	\$5,758.00	\$500.00	\$5,258.00
Creditor's Name	Riding Lawn Motor	1		•
Reg. Agent: Capitol				
Corporate Services 3675 Crestwood Parkway Suite 350 Duluth, GA 30096	As of the date you file, the claim is: Check all that apply. Contingent	J		
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or car loan)	secured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien))		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Opened 07/20 Last Date debt was incurred Active 08/20	Last 4 digits of account number 978	0		

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Debtor	1 Shirley Ru	ıth Gilliam		Case	Case number (if known)				
	First Name	Middle Na	ame Last Name						
2.4 V	/ells Fargo H	m Mortgag	Describe the property that secures the c	laim:	\$93,147.00	\$65,000.00	\$28,147.00		
Cı	reditor's Name		327 Steele Drive Hampton, GA 30228 Henry County						
	o Box 10335 es Moines, I <i>A</i>	A 50306	As of the date you file, the claim is: Check apply. Contingent	all that					
N	umber, Street, City, S	tate & Zip Code	☐ Unliquidated						
Who ov	wes the debt? C	heck one.	☐ Disputed Nature of lien. Check all that apply.						
_	tor 1 only tor 2 only		An agreement you made (such as morto car loan)	jage or secured					
☐ Debt	tor 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mechani	c's lien)					
☐ At le	ast one of the deb	tors and another	☐ Judgment lien from a lawsuit						
	ck if this claim re nmunity debt	lates to a	Other (including a right to offset)						
Date de	bt was incurred	Opened 07/05 Last Active 08/20	Last 4 digits of account number	3028					
Add t	he dollar value of	your entries in Co	olumn A on this page. Write that number h	nere:	\$148,507.0	0			
	is the last page that number here	•	the dollar value totals from all pages.		\$148,507.0	0			

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		Docume	nt Page 26 o			
Fill in this informati	ion to identify your c	ase:				
Debtor 1	Shirley Ruth Gillia	ım				
	First Name	Middle Name	Last Name			
Debtor 2	First Name	Maidalla Niana	Last Name			
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankro	uptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA - ATLAN	ITA DIVISION		
Case number						
(if known)					☐ Chec	ck if this is an
					amei	nded filing
Official Form 1	INSE/E					
		ho Have Unsecเ	ırad Claime			12/15
		Part 1 for creditors with P		2 for craditors with NO	IDDIODITY claims	
		red by Property. If more sp e. If you have no informatio				
ame and case numbe	,	socured Claims				
ame and case numbe Part 1: List All of	f Your PRIORITY Un					
ame and case numbe Part 1: List All of 1. Do any creditors I	f Your PRIORITY Uns					
ame and case numbe Part 1: List All of	f Your PRIORITY Uns					
Part 1: List All of Do any creditors I No. Go to Part 2 Yes. List all of your pridentify what type of possible, list the class.	f Your PRIORITY Unstance priority unsecured 2. Fority unsecured claims of claim it is. If a claim has aims in alphabetical orde		amounts, list that claim he ame. If you have more than	e and show both priority	and nonpriority amou	unts. As much as
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Debt	or 1 Shirley Ruth Gilliam		Case number (if known)	
2.2	IRS	Last 4 digits of account number	\$0.00	\$0.00 \$0.00
	Priority Creditor's Name 401 W. Peachtree St., NW Stop #334-D Room 400	When was the debt incurred?		
	Atlanta, GA 30308			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is:	Check all that apply	
	_	Contingent		
	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
	At least one of the debtors and another	☐ Domestic support obligations		
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts you	owe the government	
	Is the claim subject to offset?	☐ Claims for death or personal injury	while you were intoxicated	
	■ No	Other. Specify		
	☐ Yes	Notice Only		
u th	ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each c nan one creditor holds a particular claim, list the other art 2.	laim. For each claim listed, identify what t	ype of claim it is. Do not list claims already ir	ncluded in Part 1. If more e Continuation Page of
	4.4.5		7004	Total claim
4.1	1st Franklin Financial Nonpriority Creditor's Name	Last 4 digits of account number	7804	\$2,969.00
	135 E. Tugalo Street Po Box 880 Tocca, GA 30577	When was the debt incurred?	Opened 07/20 Last Active 7/06/20	_
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Secured		

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Debto	Shirley Ruth Gilliam		Case number (if known)		
4.2	AmSher Collection Services	Last 4 digits of account number	1717	\$1,602.00	
	Nonpriority Creditor's Name 4524 Southlake Parkway Suite 15 Birmingham, AL 35244	When was the debt incurred?	Opened 06/20 Last Active 05/19		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated			
	Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim: ration agreement or divorce that you did not		
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharir			
	Yes	Other. Specify Collection	Attorney T-Mobile		
4.3	CC Holdings/CardMember Services Nonpriority Creditor's Name	Last 4 digits of account number	9235	\$1,635.00	
	Attn: Card Services Po Box 9201 Old Bethpage, NY 11804	When was the debt incurred?	Opened 03/16 Last Active 11/19/17		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Disputed Type of NONPRIORITY unsecure ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	d claim:		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Credit Card	<u> </u>		
4.4	Eagles Landing Family Practice - Hampton Nonpriority Creditor's Name	Last 4 digits of account number		\$400.00	
	1058 Bear Creek Blvd Hampton, GA 30228 Number Street City State Zip Code	When was the debt incurred?			
	Who incurred the debt? Check one.	As of the date you file, the claim	э. Опеск ан шасарргу		
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure			
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans	ration agreement or divorce that you did not		
	■ No	☐ Debts to pension or profit-sharing	- :		
	☐ Yes	Other. Specify Medical Se	rvices		

Debtor	1 Shirley Ruth Gilliam		Case number (if known)			
4.5	Jefferson Capital Systems, LLC Nonpriority Creditor's Name	Last 4 digits of account number	9003	\$292.00		
	Attn: Bankruptcy 16 McIeland Road Saint Cloud, MN 56303	When was the debt incurred?	Opened 06/18 Last Active 11/17			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	■ Other. Specify Factoring C Direct Mrkt	Company Account Fingerhut ing			
4.6	Mandarich Law Group, LLP Nonpriority Creditor's Name	Last 4 digits of account number		\$400.00		
	P.O.Box 109032 Chicago, IL 60610					
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.	_				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	l claim:			
	At least one of the debtors and another	Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims				
	■ No	☐ Debts to pension or profit-sharin				
	Yes	Other. Specify Collection				
4.7	Medical Data Systems (MDS)	Last 4 digits of account number	7409	\$485.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Dept 2001 9th Ave Ste 312 Vero Beach, FL 32960	When was the debt incurred?	Opened 02/20 Last Active 04/19			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent ☐ Unliquidated				
	☐ Debtor 2 only					
	☐ Debtor 1 and Debtor 2 only					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims				
	■ No	☐ Debts to pension or profit-sharin				
	□Yes	■ Other. Specify Collection A	Attorney Ws Spalding Regional			

Debtor	1 Shirley Ruth Gilliam	Case number (if known)					
4.8	Merrick Bank	Last 4 digits of account number	\$1,600.00				
	Nonpriority Creditor's Name P.O. Box 30537	When was the debt incurred?					
	Tampa, FL 33630 Number Street City State Zip Code	As of the date you file, the claim					
	Who incurred the debt? Check one.	As of the date you me, the olding	S. Check all that apply				
	■ Debtor 1 only						
	Debtor 2 only	☐ Contingent ☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	_	Type of NONPRIORITY unsecure	d claim:				
	At least one of the debtors and another	☐ Student loans	a Gain.				
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims	ration agreement of divorce that you did not				
	■ No	ng plans, and other similar debts					
	Yes	Other. Specify Credit Card	1				
4.9	OAC Collection Specialists	Last 4 digits of account number	77X1	\$57.00			
1.0	Nonpriority Creditor's Name			Ψ37.00			
	Attn: Bankruptcy	When was the debt incurred?	Opened 7/21/15				
	Po Box 500						
	Baraboo, WI 53913 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	report as priority claims Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other Specify Medical					
4.1 0	Portfolio Recovery	Last 4 digits of account number	4420	\$333.00			
	Nonpriority Creditor's Name Attn: Bankruptcy 120 Corporate Blvd	When was the debt incurred?	Opened 10/19 Last Active 8/24/20				
	Norfolk, VA 23502 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only						
	☐ Debtor 2 only	ebtor 2 only					
	☐ Debtor 1 and Debtor 2 only	1 and Debtor 2 only					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Factoring (Other. Specify Bank Usa	Company Account Capital One				

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Debto	r 1 Shirley Ruth Gilliam		Case number (if known)				
4.1	Resurgent Capital Services	Last 4 digits of account number	4399	\$1,293.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Pob 10497 Greenville, SC 29603	When was the debt incurred?	Opened 02/18 Last Active 07/17				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only						
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not				
	_	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debta				
	■ No						
	Yes	Other. Specify Bank N.A.	Company Account Credit One				
4.1	Santander Consumer USA	Last 4 digits of account number	1000	\$13,746.00			
	Nonpriority Creditor's Name Attn: Bankruptcy 10-64-38-Fd7 601 Penn St Reading, PA 19601	Opened 08/18 Last Active When was the debt incurred? 3/11/20					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent ☐ Unliquidated					
	Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	Type of NONPRIORITY unsecured claim:				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	\square Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims					
	No	Debts to pension or profit-sharing					
	Yes	Other. Specify Automobile	e Deficiency				
4.1	Seventh Ave Nonpriority Creditor's Name	Last 4 digits of account number	984A	\$191.00			
	Attn: Bankruptcy Dept 1112 7th Ave Monroe, WI 53566	When was the debt incurred?	Opened 01/03 Last Active 8/07/20				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	No	☐ Debts to pension or profit-sharin					
	Yes	■ Other. Specify Charge Account					

Official Form 106 E/F

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Shirlev Ruth Gilliam Case number (if known)

Debt	or 1 Shirley Ruth Gilliam		Case number (if known)				
4.1	Spaulding Regional Hospital	Last 4 digits of account number		\$485.00			
4	Nonpriority Creditor's Name P.O. Box 741278	When was the debt incurred?		<u> </u>			
	Atlanta, GA 30374 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	• ,					
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharir	g plans, and other similar debts				
	Yes	Other. Specify Medical Se	rvices				
4.1 5	Sunset Finance Dba	Last 4 digits of account number	9315	\$1,650.00			
	Nonpriority Creditor's Name	_					
	Attn: Bankruptcy 902 By Pass 123 A	When was the debt incurred?	Opened 7/08/20 Last Active 7/08/20				
	Seneca, SC 29678 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	no or the date you me, the claim	o. Chook an anat appry				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharir	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Note Loan	· 				
4.1	Sunset Finance Dba	Last 4 digits of account number	5939	Unknown			
Ь	Nonpriority Creditor's Name	Last 4 digits of account number					
	Attn: Bankruptcy 902 By Pass 123 A	When was the debt incurred?	Opened 4/05/18 Last Active 8/31/18				
	Seneca, SC 29678 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only						
		Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	Student loans					
	debt	Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	Other Specify Note Loan					

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Debto	Shirley Ruth Gilliam		Case number (if known)		
4.1	Synchrony Bank	Lock A digite of account number		\$500.00	
7	Nonpriority Creditor's Name Margaret Keane, CEO 170 West Election Road Suite 125	Last 4 digits of account number When was the debt incurred?	\$300.00		
Draper, UT 84020 Number Street City State Zip Code Who incurred the debt? Check one.		As of the date you file, the claim i			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims	,		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
Yes		Other. Specify Credit Card	<u> </u>		
4.1	Wellstar Spalding Regional Hospital Nonpriority Creditor's Name	Last 4 digits of account number		\$485.00	
	601 S 8th Street Griffin, GA 30224	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Medical Se	rvices		
4.1 9	World Acceptance/World Finance Nonpriority Creditor's Name	Last 4 digits of account number	0401	\$630.00	
	Attn: Bankruptcy Po Box 6429	When was the debt incurred?	Opened 04/20 Last Active 7/24/20		
	Greenville, SC 29607 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	d claim:			
	☐ Check if this claim is for a community debt	Ck if this claim is for a community Student loans Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	offset? report as priority claims			
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other. Specify Unsecured			

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

Debtor 1 Shirley Ruth Gilliam

Case number (if known)

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				l otal Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		
	-3.	you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 28,753.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 28,753.00

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Fill in this infor	mation to identify your	case:	•		
Debtor 1 Shirley Ruth Gilliam					
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA - ATLANTA DI	VISION	
Case number					
(if known)					

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.4	•				
	Name				_
	Number	Street			-
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>

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		Docume	nt Page 36 o	156	
Fill in this	information to identify your	case:			
Debtor 1	Shirlay Buth Cilli	om			
Debioi	Shirley Ruth Gilli First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filin	ng) First Name	Middle Name	Last Name	_	
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA - ATLAN	ITA DIVISION	
Case numb	per				
(if known)					☐ Check if this is an
					amended filing
O((; · ·	15 40011				
Official	l Form 106H				
Sched	ule H: Your Cod	ebtors			12/15
your name	nd number the entries in the and case number (if known) you have any codebtors? (If	. Answer every question			of any Additional Pages, write
	,	, ,	·		
■ No □ Yes					
	nin the last 8 years, have you				states and territories include
Arizona	a, California, Idaho, Louisiana	Nevada, New Mexico, Pu	eno Rico, Texas, wash	ington, and wisconsin.)	
■ No.	Go to line 3.				
	. Did your spouse, former spor	use, or legal equivalent live	e with you at the time?		
		, 0 1	,		
in line Form	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	sure you have listed the	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor	D 0 1			ditor to whom you owe the debt
N	Name, Number, Street, City, State and Z	P Code		Check all schedules	s that apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, lir	
				☐ Schedule G, line	
-	Alicenter Otrost			=	
	Number Street City	State	ZIP Code		
		- Citale			
3.2				☐ Schedule D, line	
	Name			Schedule E/F, lir	
				☐ Schedule G, line	
-	Alexandra and a second a second and a second a second and				·
	Number Street City	State	ZIP Code		

Debtor 1 Shirley Ruth Gilliam Debtor 2 (Scores, Ellma) United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVISION Case number (If known) Official Form 106 Schedule I: Your Income Bo as complete and accurate as possible. If two married people are filing together (Debtor 1 and but 2), both are equally responsible for sputplying correct information. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, statch a separate spage with information. By you have more than one job, statch a separate spage with information about additional employers. Cocupation may include student or homemaker, if it applies. Employer's name Employer's name Employer's address 204 Price Road 204 Price Road 3204 Price Road 3205 Price Road 3205 Price Road 3206 Price Road 3207 Price Road 3208 Price Road 3209 Price Road 3209 Price Road 3209 Price Road 3200 Price	Fill	in this information to identify	/ your case:								
United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVISION Case number (If known) Official Form 106 Schedule I: Your Income Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse, if you are separated and your spouse is not filling with you, do not include information about your spouse in more space is not filling with you, do not not include information about your spouse is living with you, include information about your spouse is not filling with you, do not not include information about your spouse in more space is not filling with you, do not not include information about your spouse in more space is not filling with you, do not not include information about your spouse in more space, in more space is not filling with you, do not not include information about your spouse in more space, and separate space with information. If you have more than one job, attach a separate page with information about additional employers. Occupation Sewing Machine Operator Employer's address Occupation Sewing Machine Operator Employer's address Occupation Remployed work. Employer's address Day Price Road Brooks, GA 30205 How Iong employed there? 15 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated. I you or your non-filling spause have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filling spouse.			•	ı							
Case number (If known) Case number Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date: MM / DD/ YYYY	1		-				_				
Official Form 106I Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Occupation about additional employers. Occupation may include student or homemaker, if it applies. Part 2: Give Details About Monthly Income Employer's address 204 Price Road Brooks, GA 30205 How long employed there? 15 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 1,690.00 \$ N/A 3. Estimate and list monthly overtime pay.	Uni	ted States Bankruptcy Cour			CT OF GEORGIA - ATI	_ANTA	_				
Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are separated and your spouse is not filing with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If wo was not about your spouse, if more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Park 1:								An amende A suppleme	d filing ent showing		
Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Part 1:	-		-				i	MM / DD/ Y	YYY		
supplying correct information. If you are married and not filing binnty, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Fill in your employment information. Debtor 2 or non-filing spouse in more space is needed, attach a separate sheet to this form. Debtor 2 or non-filing spouse information. Debtor 3 or non-filing spouse information. Debtor 4 or non-filing spouse information. Debtor 5 or non-filing spouse information. Debtor 6 or non-filing spouse information. Debtor 8 or non-filing spouse information. Debtor 9 or non-fili	S	chedule I: Your	Income								12/15
1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation Employer's name Employer's name Employer's address or homemaker, if it applies. Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 1,690.00 \$ N/A N/A	sup spo atta	plying correct information use. If you are separated a ch a separate sheet to this	i. If you are marr and your spouse s form. On the to	ied and not filing w	ng jointly, and your s ith you, do not includ	pouse i e inforn	ร living witl nation aboเ	h you, inclu ut your spo	ude inform use. If mo	ation about re space is i	your needed,
If you have more than one job, attach a separate page with information about additional employers. Occupation Sewing Machine Operator Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated. If you or your non-filling spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 1,690.00 \$ N/A Not employed □ Not emplo	Par	t 1: Describe Emplo	yment								
attach a separate page with information about additional employers. Not employed	1.				Debtor 1			Debtor 2	or non-fili	ng spouse	
Include part-time, seasonal, or self-employed work. Occupation about additional employers and self-employed work. Occupation may include student or homemaker, if it applies. Employer's address How long employed there? Sewing Machine Operator Nylite Products Co, Inc 204 Price Road Brooks, GA 30205 How long employed there? 15 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 1,690.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A				ment status	■ Employed	■ Employed			yed		
Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address Thou long employed there? Its years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 1,690.00 \$ N/A N/A				inent status	☐ Not employed			☐ Not ei	mployed		
Self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? 15 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filling spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A		employers.	Occupa	ation	Sewing Machine Operator						
Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 N/A			al, or Emplo y	/er's name	Nylite Products (Co, Inc	:				
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filling spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 1,690.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A				er's address		5					
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 1,690.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A			How Io	ng employed t	here? 15 years	i					
spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 1,690.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A	Par	t 2: Give Details Abo	out Monthly Inco	me							
The space is a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 2. \$ 1,690.00 \$ N/A \$ N/A				le this form. If	you have nothing to rep	oort for a	any line, wri	te \$0 in the	space. Incl	ude your nor	n-filing
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 1,690.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A					ombine the information	for all e	mployers fo	r that perso	n on the lin	es below. If y	you need
2. deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$1,690.00 \$N/A 3. Estimate and list monthly overtime pay. 3. +\$0.00 +\$N/A							For De	ebtor 1			
	2.					2.	\$	1,690.00	\$	N/A	
4. Calculate gross Income. Add line 2 + line 3. 4. \$\ \[\\$ \] 1,690.00 \ \\$ \]	3.	Estimate and list monthl	ly overtime pay.			3.	+\$	0.00	+\$	N/A	
	4.	Calculate gross Income.	Add line 2 + line	3.		4.	\$1,6	690.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	otor 1	Shirley Ruth Gilliam	-	C	Case	number (if kno	wn)				
					For	Debtor 1			Debtor		
	Cop	y line 4 here	4.		\$	1,690.	00	\$	9	N/A	<u> </u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a		\$	338.	00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$_		00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.		\$		00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d		\$_	0.	00	\$_		N/A	_
	5e.	Insurance	5e		\$	0.	00	\$		N/A	
	5f.	Domestic support obligations	5f.		\$_	0.	00	\$		N/A	<u> </u>
	5g.	Union dues	5g		\$_		00	\$_		N/A	_
	5h.	Other deductions. Specify:	5h	.+	\$_	0.	00	+ \$_		N/A	<u> </u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	338.	00	\$_		N/A	<u>. </u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	1,352.	00	\$_		N/A	<u>. </u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$	0	00	\$		NI/A	
	8b.	Interest and dividends	8b		\$ -		00	-\$ -		N/A N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$		00	\$_		N/A	_
	8d.	Unemployment compensation	8d		\$		00	\$		N/A	_
	8e.	Social Security	8e		\$	2,033.	00	\$		N/A	<u>\</u>
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g		\$_ \$		00 00	\$_ \$		N/A N/A	_
	8h.	Other monthly income. Specify:	8h		<u>\$</u>		00	· —		N/A	_
9.		all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	9		2,033.		\$		N/	_
		Ç	Е	L			Ħ	L'=		1	
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		3,385.00	\$		N/A	= \$	3,385.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.									
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe		•	,		,		e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							12.	\$	3,385.00
12	Do:	you expect an increase or decrease within the year often you file this farm	2							Combi month	ned ly income
13.	■	you expect an increase or decrease within the year after you file this form No. Yes Explain:	<i>r</i>								

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	ition to identify yo	our case:					
Deb		Shirley Ruth				Che	eck if this is:	
Deb	tor 2						An amended filing A supplement show	wing postpetition chapter
(Spc	ouse, if filing)					_	13 expenses as of	the following date:
Unite	ed States Bankı	ruptcy Court for the		HERN DISTRICT OF GEOF TA DIVISION	RGIA -		MM / DD / YYYY	
	e number nown)							
		rm 106J				•		
		J: Your						12/1:
info nun Par	ormation. If manual manual meters (if known terminal) terminal meters (if known terminal) meters (if k	ore space is ne n). Answer ever	eded, attary questio	. If two married people ar ich another sheet to this n.				
1.	Is this a joir							
	■ No. Go to		in a separ	ate household?				
	□ N □ Y		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Del	btor 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						☐ Yes
								□ No □ Yes
								□ No
								☐ Yes
								□ No
								☐ Yes
3.	expenses o	penses include f people other t d your depende	han $_{oldsymbol{\sqcap}}$	No Yes				
exp	imate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance in Cluded it on <i>Schedule I:</i> Y			Your exp	enses
4.		or home owners and any rent for th		ises for your residence. In or lot.	nclude first mortgag	e 4.	\$	662.00
	If not include	led in line 4:						
	4a. Real	estate taxes				4a.	\$	0.00
	•	rty, homeowner's				4b.	·	0.00
		maintenance, re owner's associat		upkeep expenses		4c. 4d.		0.00
5.				our residence, such as ho	me equity loans	4u. 5.		0.00

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Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: Cable/Internet d and housekeeping supplies dcare and children's education costs hing, laundry, and dry cleaning conal care products and services ical and dental expenses asportation. Include gas, maintenance, bus or train fare. tot include car payments. ertainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations rance. tot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance	6a. 6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	207.00 56.00 120.00 200.00 700.00 0.00 95.00 95.00 500.00 350.00
Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: Cable/Internet d and housekeeping supplies dcare and children's education costs hing, laundry, and dry cleaning sonal care products and services ical and dental expenses asportation. Include gas, maintenance, bus or train fare. iot include car payments. ertainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations rance. iot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance	6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	56.00 120.00 200.00 700.00 0.00 95.00 95.00 500.00
Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: Cable/Internet d and housekeeping supplies dcare and children's education costs hing, laundry, and dry cleaning sonal care products and services ical and dental expenses asportation. Include gas, maintenance, bus or train fare. iot include car payments. ertainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations rance. iot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance	6c. 6d. 7. 8. 9. 10. 11.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	56.00 120.00 200.00 700.00 0.00 95.00 95.00 500.00
Other. Specify: Cable/Internet d and housekeeping supplies dcare and children's education costs hing, laundry, and dry cleaning conal care products and services ical and dental expenses asportation. Include gas, maintenance, bus or train fare. iot include car payments. ertainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations rance. iot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance	6d. 7. 8. 9. 10. 11. 12.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	120.00 200.00 700.00 0.00 95.00 95.00 500.00 350.00
d and housekeeping supplies dcare and children's education costs hing, laundry, and dry cleaning conal care products and services ical and dental expenses asportation. Include gas, maintenance, bus or train fare. tot include car payments. ertainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations rance. tot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance	7. 8. 9. 10. 11. 12.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	700.00 0.00 95.00 95.00 500.00 350.00
dcare and children's education costs hing, laundry, and dry cleaning conal care products and services ical and dental expenses asportation. Include gas, maintenance, bus or train fare. tot include car payments. ertainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations rance. tot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance	8. 9. 10. 11. 12. 13.	\$	95.00 95.00 500.00 350.00
hing, laundry, and dry cleaning conal care products and services ical and dental expenses isportation. Include gas, maintenance, bus or train fare. iot include car payments. ertainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations irance. iot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance	9. 10. 11. 12. 13.	\$	95.00 95.00 500.00 350.00
conal care products and services ical and dental expenses isportation. Include gas, maintenance, bus or train fare. iot include car payments. ertainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations irance. iot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance	10. 11. 12. 13.	\$ \$ \$ \$	95.00 95.00 500.00 350.00
ical and dental expenses asportation. Include gas, maintenance, bus or train fare. not include car payments. ertainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations arance. not include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance	11. 12. 13.	\$ \$ \$	500.00 350.00 0.00
asportation. Include gas, maintenance, bus or train fare. not include car payments. ertainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations ertaince. not include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance	12. 13.	\$	500.00 350.00 0.00
not include car payments. Pertainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations Pertainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations Pertainment, magazines, and books rance. Pertainment in the pe	13.	\$	0.00
ertainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations rance. not include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance	13.	\$	0.00
ritable contributions and religious donations rance. oot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance			
rance. not include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance	14.	\$	
ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance			0.00
Life insurance Health insurance			
Health insurance	4-	•	
	15a.	·	0.00
	15b.	·	0.00
Vehicle insurance	15c.		400.00
Other insurance. Specify:	15d.	\$	0.00
es. Do not include taxes deducted from your pay or included in lines 4 or 20. cify:	16.	\$	0.00
allment or lease payments:			
Car payments for Vehicle 1	17a.	\$	0.00
Car payments for Vehicle 2	17b.	\$	0.00
Other. Specify:	17c.	\$	0.00
Other. Specify:	17d.	\$	0.00
r payments of alimony, maintenance, and support that you did not report as ucted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).		\$	0.00
er payments you make to support others who do not live with you.		\$	0.00
cify:	19.	·	
er real property expenses not included in lines 4 or 5 of this form or on Scho		our Income.	
Mortgages on other property	20a.		0.00
Real estate taxes	20b.	\$	0.00
Property, homeowner's, or renter's insurance	20c.	\$	0.00
Maintenance, repair, and upkeep expenses	20d.	\$	0.00
Homeowner's association or condominium dues	20e.	\$	0.00
er: Specify:	21.	+\$	0.00
· · ·			
· · ·			
· · · · · · · · · · · · · · · · · · ·		\$	3,385.00
Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
Add line 22a and 22b. The result is your monthly expenses.		\$	3,385.00
ulate your monthly net income.	23a.	\$	3,385.00
Copy line 12 (your combined monthly income) from Schedule I.	23b.	-\$	3,385.00
Copy line 12 (your combined monthly income) from Schedule I. Copy your monthly expenses from line 22c above.		\$	0.00
:	r: Specify: ulate your monthly expenses Add lines 4 through 21. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 Add line 22a and 22b. The result is your monthly expenses. ulate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I.	r: Specify:	r: Specify: ulate your monthly expenses Add lines 4 through 21. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 Add line 22a and 22b. The result is your monthly expenses. ulate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. Copy your monthly expenses from line 22c above. 21. +\$ \$ Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$ \$ Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$ \$ \$ Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$ \$ \$ \$ \$ Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$ \$ \$ \$ \$ \$ Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$ \$ \$ \$ \$ \$ \$ \$ \$ Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

☐ Yes.

Explain here: Client has 2 sons in hh that get diability but pay for the cars in there names and don't contribute to the hh, the mother pays for all the bills for them.

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Statement of Intention for Individuals Filing Under Chapter	☐ Check if this is an amended filing
United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVISION Case number (if known) Official Form 108 Statement of Intention for Individuals Filing Under Chapter If you are an individual filing under chapter 7, you must fill out this form if:	amended filing
Case number (if known) Official Form 108 Statement of Intention for Individuals Filing Under Chapter If you are an individual filing under chapter 7, you must fill out this form if:	amended filing
Official Form 108 Statement of Intention for Individuals Filing Under Chapter If you are an individual filing under chapter 7, you must fill out this form if:	amended filing
Statement of Intention for Individuals Filing Under Chapter If you are an individual filing under chapter 7, you must fill out this form if:	· 7 12/15
creditors have claims secured by your property, or	
 you have leased personal property and the lease has not expired. You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set f whichever is earlier, unless the court extends the time for cause. You must also send copies to the conthe form 	
If two married people are filing together in a joint case, both are equally responsible for supplying correct info sign and date the form.	ormation. Both debtors must
Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the write your name and case number (if known).	e top of any additional pages,
Part 1: List Your Creditors Who Have Secured Claims	
1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Cinformation below.	Official Form 106D), fill in the
Identify the creditor and the property that is collateral What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Ford Motor Credit Company LLC name: Surrender the property. Retain the property and redeem it.	□ No
Description of All Debtor's real and personal Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property property securing debt: Retain the property and [explain]: avoid lien using 11 U.S.C. § 522(f)	
Creditor's NMAC name: □ Surrender the property. Retain the property and redeem it.	□No
Description of 2017 Nissan Titan 30000 miles property property securing debt: Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	■ Yes
Creditor's Republic Finance, LLC	□ No
name: Retain the property and redeem it.	■ Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

De	btor 1 Shirley Ruth Gilliam	Case number (if known)	
;	securing debt:	avoid lien using 11 U.S.C. § 522(f)	-
	Creditor's Wells Fargo Hm Mortgag	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
ı	Description of or operty 327 Steele Drive Hampton, GA 30228 Henry County securing debt:	■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	■ Yes
For in t	tt 2: List Your Unexpired Personal Property Leases any unexpired personal property lease that you listed the information below. Do not list real estate leases. Un may assume an unexpired personal property lease if	nexpired leases are leases that are still in effect; the	lease period has not yet ended.
De	scribe your unexpired personal property leases		Will the lease be assumed?
De	ssor's name: scription of leased operty:		□ No
	ssor's name:		□ Yes
De	scription of leased operty:		□ Yes
	ssor's name: scription of leased		□ No
	operty:		☐ Yes
	ssor's name:		□ No
	scription of leased operty:		□ Yes
	ssor's name:		□ No
	scription of leased operty:		□ Yes
_	ssor's name:		□ No
	scription of leased operty:		☐ Yes
	ssor's name:		□ No
_	scription of leased operty:		☐ Yes
Pa	rt 3: Sign Below		
Und	der penalty of perjury, I declare that I have indicated m perty that is subject to an unexpired lease.	y intention about any property of my estate that sec	ures a debt and any personal
Χ	/s/ Shirley Ruth Gilliam	X	
	Shirley Ruth Gilliam Signature of Debtor 1	Signature of Debtor 2	
	Date September 21, 2020	Date	

Official Form 108

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Fill in this infor	mation to identify your	case:	3		
Debtor 1	Shirley Ruth Gilli	am			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA - ATLANTA DIV	/ISION	
Case number					
(if known)					☐ Check if this is an
					amended filing
					3

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets Your assets Value of what you own Schedule A/B: Property (Official Form 106A/B) 65.000.00 1a. Copy line 55, Total real estate, from Schedule A/B..... 1b. Copy line 62, Total personal property, from Schedule A/B..... 38.585.00 1c. Copy line 63, Total of all property on Schedule A/B..... 103,585.00 Part 2: Summarize Your Liabilities Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 148.507.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... 28,753.00 Your total liabilities 177.260.00 Part 3: Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) 3,385.00 Copy your combined monthly income from line 12 of Schedule I..... Schedule J: Your Expenses (Official Form 106J) 3,385.00 Copy your monthly expenses from line 22c of Schedule J..... Part 4: Answer These Questions for Administrative and Statistical Records Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Shirley Ruth Gilliam Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____1,609.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in this inform	nation to identify your	case:		
Debtor 1	Shirley Ruth Gilli			_
Dobtor 2	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	_
United States Ba	nkruptcy Court for the:	NORTHERN DISTRIC	T OF GEORGIA - ATLANTA DIVISION	_
Case number(if known)				☐ Check if this is an amended filing
Official Forn				
Declarat	ion About a	an Individua	I Debtor's Schedules	S 12/15
years, or both. 18	or property by fraud i 3 U.S.C. §§ 152, 1341, 1 n Below		nkruptcy case can result in fines up to \$2	250,000, or imprisonment for up to 20
Did you pay	or agree to pay some	one who is NOT an atto	orney to help you fill out bankruptcy forn	ns?
■ No				
☐ Yes. N	lame of person			h Bankruptcy Petition Preparer's Notice, aration, and Signature (Official Form 119)
	ty of perjury, I declare true and correct.	that I have read the sur	mmary and schedules filed with this dec	laration and
X /s/ Shir	ley Ruth Gilliam		x	
	Ruth Gilliam e of Debtor 1		Signature of Debtor 2	

Date

Date September 21, 2020

Fill in this info	ormation to identify your case:		Ch	ock one	hay anly as d	irected in this form and	d in Form
Debtor 1	Shirley Ruth Gilliam			2A-1Sup		incolod in this form and	3 III I OIIII
Debtor 2				■ 1. The	ere is no pres	umption of abuse	
(Spouse, if filing)				_	•	o determine if a presu	motion of abuse
United States	Bankruptcy Court for the: NORTHERN DIS GEORGIA - ATLA			ар	plies will be n	nade under <i>Chapter 7</i> icial Form 122A-2).	•
Case number (if known)	r					does not apply now by service but it could a	
				☐ Che	ck if this is a	n amended filing	
Official I	Form 122A - 1						
Chapte	7 Statement of Your Cui	rent Mor	nthly Inc	ome	!		04/2
attach a separa case number (i qualifying milit	e and accurate as possible. If two married people at the sheet to this form. Include the line number to be f known). If you believe that you are exempted frow ary service, complete and file Statement of Exemple Calculate Your Current Monthly Income	which the additior m a presumption	nal information a of abuse becau	applies. C ise you d	On the top of a o not have prir	ny additional pages, wri narily consumer debts o	te your name and or because of
1. What is	your marital and filing status? Check one or	ıly.					
■ Not i	married. Fill out Column A, lines 2-11.						
☐ Marr	ied and your spouse is filing with you. Fill o	ut both Columns	A and B, lines	2-11.			
☐ Marr	ied and your spouse is NOT filing with you.	You and your s	spouse are:				
☐ Li	ving in the same household and are not lega	ılly separated. I	Fill out both Co	lumns A	and B, lines 2	2-11.	
pe	ving separately or are legally separated. Fill enalty of perjury that you and your spouse are lying apart for reasons that do not include evading.	egally separated	d under nonbar	kruptcy	law that appli	es or that you and you	
101(10A). F the 6 month	verage monthly income that you received from all or example, if you are filing on September 15, the 6-m s, add the income for all 6 months and divide the tota n the same rental property, put the income from that p	onth period would by 6. Fill in the res	be March 1 thro	ugh Augu: de any inc	st 31. If the amo	ount of your monthly incor ore than once. For examp	ne varied during ole, if both
				Column Debtor		Column B Debtor 2 or non-filing spouse	
	oss wages, salary, tips, bonuses, overtime, deductions).	and commission	ons (before all	\$	1,609.00	\$	
	y and maintenance payments. Do not include B is filled in.	payments from	a spouse if	\$	0.00	\$	
of you of from an and room	runts from any source which are regularly por your dependents, including child support unmarried partner, members of your household mmates. Include regular contributions from a sp. Do not include payments you listed on line 3.	. Include regular d, your depende	contributions nts, parents,	\$	0.00	\$	
5. Net inco	ome from operating a business, profession,						
_			otor 1				
	eceipts (before all deductions)	\$ <u>0.00</u> -\$ <u>0.00</u>					
	y and necessary operating expenses		Copy here ->	. ¢	0.00	\$	
	hthly income from a business, profession, or far	m \$	copy nere >	Ψ	0.00	Ψ	
6. Net inco	onie ironi rentai and otner real property	Deb	otor 1				
Gross re	eceipts (before all deductions)	\$ 0.00					
	y and necessary operating expenses	-\$ 0.00					
	onthly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	
	. dividends, and rovalties	-		\$	0.00	\$	

Official Form 122A-1

Debto	Shirley Ruth Gilliam	Case number (if ki	own)		
		Column A Debtor 1	De	olumn B ebtor 2 or on-filing spo	use
8.	Unemployment compensation	\$ 0	.00 \$		
	Do not enter the amount if you contend that the amount received was a benefit unde the Social Security Act. Instead, list it here: For you\$ 0.00	r			
	For your spouse \$				
9.	Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.	i	00 \$		
10.	Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below SSI \$2033	\$ 0	.00 \$		
	. 331 \$2033		.00		
	Total amounts from separate pages, if any.	•	.00		
11.	Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. \$ Determine Whether the Means Test Applies to You	1,609.00 +	\$ 		\$ 1,609.00 Total current monthly income
	• • • • • • • • • • • • • • • • • • • •				
12.	Calculate your current monthly income for the year. Follow these steps:				
	12a. Copy your total current monthly income from line 11	Copy lin	e 11 here	=> \$	1,609.00
	Multiply by 12 (the number of months in a year)				x 12
	12b. The result is your annual income for this part of the form			12b. \$	19,308.00
13.	Calculate the median family income that applies to you. Follow these steps:			L_	
	Fill in the state in which you live.				
	Fill in the number of people in your household.				
	Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified for this form. This list may also be available at the bankruptcy clerk's office.	I in the separate in	 nstructions	13. \$	50,128.00
14.	How do the lines compare?				
	 Line 12b is less than or equal to line 13. On the top of page 1, check box Go to Part 3. Do NOT fill out or file Official Form 122A-2. Line 12b is more than line 13. On the top of page 1, check box 2, <i>The p</i>. 				rm 122A-2.
Dont	Go to Part 3 and fill out Form 122A–2.				
Part	3: Sign Below By signing here, I declare under penalty of perjury that the information on this st	tatement and in o	ny attach~	nante ie true c	and correct
		iaienneni and in al	iy allacilii	icilis is liue a	ina correct.
	X /s/ Shirley Ruth Gilliam Shirley Ruth Gilliam				
	Cimicy Ruth Cimani				

Official Form 122A-1

Debtor 1	Shirley Ruth Gilliam	Case number (if known)	
	Signature of Debtor 1		
Da	te September 21, 2020 MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form	n.	

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United States Bankruptcy Court NORTHERN DISTRICT OF GEORGIA - ATLANTA DIVISION

	110ItIIII	District of Georgia Hiles		311
In re	Shirley Ruth Gilliam		Case No.	
		Debtor(s)	Chapter	7
	VERIF	FICATION OF CREDITOR	MATRIX	
The abo	ove-named Debtor hereby verifies that	at the attached list of creditors is true and c	orrect to the best	of his/her knowledge.
Date:	September 21, 2020	/s/ Shirley Ruth Gilliam		
		Shirley Ruth Gilliam		

Signature of Debtor

1st Franklin Financial 135 E. Tugalo Street Po Box 880 Tocca, GA 30577

AmSher Collection Services 4524 Southlake Parkway Suite 15 Birmingham, AL 35244

CC Holdings/CardMember Services Attn: Card Services Po Box 9201 Old Bethpage, NY 11804

Eagles Landing Family Practice - Hampton 1058 Bear Creek Blvd Hampton, GA 30228

Ford Motor Credit Company LLC Reg. Agent: The Corporation Company 112 North Main Street Cumming, GA 30040

Georgia Department of Revenue Compliance Division ARCS Bankruptcy 1800 Century BLVD NE Suite 9100 Atlanta, GA 30345-3202

IRS
401 W. Peachtree St., NW
Stop #334-D
Room 400
Atlanta, GA 30308

Jefferson Capital Systems, LLC Attn: Bankruptcy 16 Mcleland Road Saint Cloud, MN 56303

Mandarich Law Group, LLP P.O.Box 109032 Chicago, IL 60610

Medical Data Systems (MDS) Attn: Bankruptcy Dept 2001 9th Ave Ste 312 Vero Beach, FL 32960

Merrick Bank P.O. Box 30537 Tampa, FL 33630

NMAC Attn: Bankruptcy Po Box 660366 Dallas, TX 75266

OAC Collection Specialists Attn: Bankruptcy Po Box 500 Baraboo, WI 53913

Portfolio Recovery Attn: Bankruptcy 120 Corporate Blvd Norfolk, VA 23502

Republic Finance, LLC Reg. Agent: Capitol Corporate Services 3675 Crestwood Parkway Suite 350 Duluth, GA 30096

Resurgent Capital Services Attn: Bankruptcy Pob 10497 Greenville, SC 29603

Santander Consumer USA Attn: Bankruptcy 10-64-38-Fd7 601 Penn St Reading, PA 19601

Seventh Ave Attn: Bankruptcy Dept 1112 7th Ave Monroe, WI 53566 Spaulding Regional Hospital P.O. Box 741278 Atlanta, GA 30374

Sunset Finance Dba Attn: Bankruptcy 902 By Pass 123 A Seneca, SC 29678

Synchrony Bank Margaret Keane, CEO 170 West Election Road Suite 125 Draper, UT 84020

Wells Fargo Hm Mortgag Po Box 10335 Des Moines, IA 50306

Wellstar Spalding Regional Hospital 601 S 8th Street Griffin, GA 30224

World Acceptance/World Finance Attn: Bankruptcy Po Box 6429 Greenville, SC 29607

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	er 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	<u>\$15</u>	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.